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SERIAL NUMBER 10/693,252	FILING OR 371(c) DATE 10/24/2003 RULE	CLASS 424	GROUP ART UNIT 1618	ATTORNEY DOCKET NO. 061807-5000-US01
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APPLICANTS
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**** CONTINUING DATA *******
 This appln claims benefit of 60/421,470 10/24/2002 and is a CIP of 09/715,859 11/17/2000 PAT 6,673,333 which claims benefit of 60/201,816 05/04/2000 *YAS*

**** FOREIGN APPLICATIONS ******* *YAS*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 02/04/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 5	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

ADDRESS
67374

TITLE
Functional MRI agents for cancer imaging

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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